



August 31, 2015

CUST ID No. 1315149

BRYAN J PROVIDAKES
CMH INDIANA
437 N MAIN ST PO BOX 1218
MIDDLEBURY IN 46540

CONDITIONAL APPROVAL
PLAN APPROVAL EXPIRES: 08/31/2020

Re: Description: PREFABRICATED PLUMBING SYSTEM
Manufacturer: CLAYTON HOMES - CREST HOMES
Product Name: 48' x 27' SINGLE FAMILY DWELLING OVER A BASEMENT OR CRAWLSPACE
(trans id 2552716)
Model Number(s): 4828-9000
Product File No: 20150147

The specifications and/or plans for this plumbing product have been reviewed and determined to be in compliance with chapters SPS 382 through 384, Wisconsin Administrative Code, and Chapters 145 and 160, Wisconsin Statutes.

The Department hereby issues an approval based on the Wisconsin Statutes and the Wisconsin Administrative Code. This approval is valid until the end of August 2020.

This approval is contingent upon compliance with the following stipulation(s):

- The flowing water supply pressure at the point(s) of connection must be at least 35.472 psig.
- The manufacture must keep at the manufacturing plant a set of plans and specifications bearing the department's stamp of approval. The plans and specifications must be open to inspection by an authorized representative of the department.
- This approval is for only the prefabricated plumbing system as defined herein. "Prefabricated Plumbing" means concealed drain piping, vent piping or water supply piping or a combination of these types of piping, contained in a modular building component, which will not be visible for inspection when delivered to the final site of installation.

The department is in no way endorsing this product or any advertising, and is not responsible for any situation which may result from its use.

| Identification Numbers |
|--|
| Transaction ID No. 2552716 |
| Site ID No. |
| Please refer to both identification numbers, above, in all correspondence with the agency. |

Sincerely,

Timothy J. Lamb
Plumbing Plan Reviewer
Department of Safety and Professional Services
Division of Industry Services
Bureau of Technical Services
Madison WI 53703-2658
608-266-9647 Phone
608-267-9723 Fax
tim.lamb@wi.gov E-mail

| | |
|-----------------|--------|
| Fee Required \$ | 250.00 |
| Fee Received \$ | 250.00 |
| Balance Due \$ | 0.00 |

WiSMART code: 7657